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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/432,362 11/03/1999 ABN  
 and claims benefit of 60/220,302 07/24/2000  
 and claims benefit of 60/273,311 03/01/2001  
 and claims benefit of 60/106,904 11/03/1998

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/10/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Signature: <i>Chute</i> Initials: <i>MA</i>				

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## TITLE

Graphical object interactions

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of
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